

PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

COPY

I HEREBY DECLARE THAT:

My residence, post office address, and citizenship are as stated next to my name in PART A on page 2 hereof.

I believe I am the original, first, and sole inventor (if only one name is listed) or an original, first and joint inventor (if plural names are listed) of the subject matter which is claimed and for which a patent is sought on the invention entitled PROBE COMPOSITION AND METHOD, the specification of which:

[] is attached hereto.
 [] was filed on _____ as Attorney Docket No. _____.
 [X] was filed on August 4, 1993 as Application Serial No. 08/102,372 and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Sec. 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Sec. 119 of any foreign application(s) for patent or inventor's certificate listed in PART B on page hereof and have also identified in PART B on page 2 hereof any foreign application for patent or inventor's certificate having a filing date before that of the application of which priority is claimed.

I hereby claim the benefit under Title 35, United States Code, Sec. 120 of any United States application(s) listed in PART C on page 2 hereof and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Sec. 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Sec. 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further that the statements were made with the knowledge that willful false statements and the lie so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following as my attorney or agent with full power of substitution to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith: *

Peter J. Dehlinger	Reg. No. 28,006
Joseph H. Smith	Reg. No. 30,328
Gary R. Fabian	Reg. No. 33,875
Carol A. Stratford	Reg. No. 34,444
Vincent M. Powers	Reg. No. 36,246

whose mailing address for this application is:

LAW OFFICES OF PETER J. DEHLINGER
 P. O. BOX 60850
 Palo Alto, CA 94306
 TELEPHONE: (415) 324-0880

See Page 2 attached, signed, and made a part hereof.

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PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

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PART A: Inventor Information And Signature

Full name of SOLE or FIRST inventor Paul David GROSSMANCitizenship U.S.A.Post Office Address 116 Bloomfield Road
Burlingame, CA 94010Residence (if Different) (same)Inventor's signature: Paul David GrossmanDate: 9-14-93Full name of SECOND joint inventor, if any Steven FUNGCitizenship U.S.A. CANADAPost Office Address 420 Adobe Place
Palo Alto, CA 94306Residence (if different) (same)Second Inventor's signature: Steven FungDate: Sept 16, 1993Full name of THIRD joint inventor, if any Steven Michael MENCHENCitizenship U.S.A.Post Office Address 768 Vanda Way
Fremont, CA 94061

Residence (if different) _____

Third Inventor's signature: Steven Michael MennenDate: Sept. 14, 1993Full name of FOURTH joint inventor, if any Sam Lee WOOCitizenship U.S.A.Post Office Address 450 Carlos Avenue
Redwood City, CA 94061

Residence (if different) _____

Fourth Inventor's signature: Sam Lee WooDate: 9-14-93Full name of FIFTH joint inventor, if any Emily Susan WINN-DEENCitizenship U.S.A.Post Office Address 239 Stilt Court
Foster City, CA 94404

Residence (if different) _____

Fifth Inventor's signature: Emily Susan Winn-DeenDate: 10-1-93

See Pages 1 and 3 to which this is attached and from which this Page 2 continues.

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PART B: Prior Foreign Application(s)

Serial No.	Country	Day/Month/Year Filed	Priority Claimed
			<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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PART C: Claim For Benefit of Filing Date Of Earlier U.S. Applications(s)

Serial No.	Filing Date	Status:				
862,642	03 April 1992	<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input checked="" type="checkbox"/> Abandoned		
866,018	07 April 1992	<input type="checkbox"/> Patented	<input checked="" type="checkbox"/> Pending	<input type="checkbox"/> Abandoned		
973,118	06 Nov 1992	<input type="checkbox"/> Patented	<input checked="" type="checkbox"/> Pending	<input type="checkbox"/> Abandoned		

See Pages 1 and 2 to which this is attached and from which this Page 3 continues.

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Please type a plus sign (+) inside this box → +Approved for use through 10/31/2002. OMB 0651-0035
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**ASSOCIATE
POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/167,337
Filing Date	June 10, 2002
First Named Inventor	Paul D. Grossman
Group Art Unit	1637
Examiner Name	Kenneth R. Horlick
Attorney Docket Number	4179C15

I hereby appoint:

☒ Practitioners at Customer Number

22852

OR☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.**OR**

<input type="checkbox"/> Firm or Individual Name				
Address				
City		State		Zip
Country				
Telephone		Fax		

I am the:

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (PTO/SB/96)
- ☒ Attorney or Agent of Record.

SIGNATURE of Applicant or Agent of Record

Signature	Vincent M. Powers		
Name	Vincent M. Powers, Patent Attorney, Reg. No. 36,246	Date	March 26, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

☐ * Total of _____ forms are submitted.